

## DO/EO WORKSHEET

Paralegal/ National Stage Division

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## INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

- |  |  |
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| <input checked="" type="checkbox"/> International Application (RECORD COPY)  | <input type="checkbox"/> PCT/IB/331  |
| <input type="checkbox"/> Article 19 Amendments   | <input type="checkbox"/> Request form PCT/RO/101   |
| <input type="checkbox"/> PCT/IPEA/409 IPER: <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU  | <input checked="" type="checkbox"/> PCT/ISA/210 - Search Report: <input type="checkbox"/> EP <input checked="" type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU  |
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| <input type="checkbox"/> Annexes to 409  | <input type="checkbox"/> Search Report References  |
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**EXPRESS**

## RECEIPTS FROM THE APPLICANT (other than checked above):

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| <input checked="" type="checkbox"/> Basic National Fee (or authorization to charge)  | <input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on:                   |
| <input checked="" type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input type="checkbox"/> Abstract | 1. <u>2-18-05</u> 3. _____   |
| <input checked="" type="checkbox"/> Drawing Figure(s) - (# of drwgs. <u>7</u> )  | <input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on:        |
| <input type="checkbox"/> Translation of Article 19 Amendments  | 1. <u>2-18-05</u> 2. _____ 3. _____  |
| <input type="checkbox"/> entered <input type="checkbox"/> not entered:   | <input checked="" type="checkbox"/> Assignment Document (forwarded to Assignment Branch) |
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| <input type="checkbox"/> not a page for page substitution  | <input checked="" type="checkbox"/> Oath/ Declaration (executed)                         |
| <input type="checkbox"/> other: _____  | <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing          |
| <input checked="" type="checkbox"/> Application Data Sheet   | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Power of Attorney/ Change of Address  |  |

## NOTES:

☐ I.A. used as Specification ☐ Other: \_\_\_\_\_

35 U.S.C. 371 - Receipt of Request (PTO-1390)

Date Acceptable Oath/ Declaration Received: \_\_\_\_\_

Date of Completion of requirements under 35 U.S.C. 371 \_\_\_\_\_

Date of Completion of ALL requirements (no EP requested) \_\_\_\_\_

Date of Completion of DO/EO 903 - Notification of Acceptance \_\_\_\_\_

Date of Completion of DO/EO 905 - Notification of Missing Requirements \_\_\_\_\_

Date of Completion of DO/EO 909 - Notification of Abandonment \_\_\_\_\_

Date of Completion of DO/EO 916 - Notification of Defective Response \_\_\_\_\_

Date of Completion of DO/EO 922 \_\_\_\_\_

Date of Completion of DO/EO 923 \_\_\_\_\_

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